

**APPLICATION DATA SHEET**

**Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: Listing

Number of CD disks:: 3

Number of copies of CDs:: 3

Sequence submission?: CD

Computer Readable Form (CRF)?:: Yes

Number of copies of CRF:: 1

Title :: METHOD AND NUCLEIC ACIDS FOR THE  
IMPROVED TREATMENT OF BREAST CELL  
PROLIFERATIVE DISORDERS

Attorney Docket Number:: 47675-198

Request for Early Publication?: No

Request for Non-Publication?: No

Suggested Drawing Figure::

Total Drawing Sheets:: 110

Small Entity?: Yes

Petition included?: No

Petition Type::

Licensed U.S. Gov't Agency:: No

Contract or Grant No::

Secrecy Order in Parent Appl.?: No

## First Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	NL
Status::	Full capacity
Given Name::	John
Middle Name::	
Family Name::	Foekens
Name Suffix::	
City of Residence::	Rotterdam
State or Province of Residence::	
Country of Residence::	NL
Street of mailing address::	Filosefentuin 35
City of mailing address::	Rotterdam
State or Province of mailing address::	
Country of mailing address::	NL
Postal or Zip Code of mailing address::	NL-2908 XA

## Second Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	DE
Status::	Full capacity
Given Name::	Nadia
Middle Name::	
Family Name::	Harbeck
Name Suffix::	
City of Residence::	Offerfing
State or Province of Residence::	

Country of Residence::	DE
Street of mailing address::	Palnkamer Str. 49
City of mailing address::	Offerding
State or Province of mailing address::	
Country of mailing address::	DE
Postal or Zip Code of mailing address::	83624

### **Third Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	DE
Status::	Full capacity
Given Name::	Thomas
Middle Name::	
Family Name::	Koenig
Name Suffix::	
City of Residence::	Berlin
State or Province of Residence::	
Country of Residence::	DE
Street of mailing address::	Skalitzer Strasse 18
City of mailing address::	Berlin
State or Province of mailing address::	
Country of mailing address::	DE
Postal or Zip Code of mailing address::	10999

#### **Fourth Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	DE
Status::	Full capacity
Given Name::	Sabine
Middle Name::	
Family Name::	Maier
Name Suffix::	
City of Residence::	Berlin
State or Province of Residence::	
Country of Residence::	DE
Street of mailing address::	Markelstr. 60
City of mailing address::	Berlin
State or Province of mailing address::	
Country of mailing address::	DE
Postal or Zip Code of mailing address::	12163

#### **Fifth Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	NL
Status::	Full capacity
Given Name::	John
Middle Name::	
Family Name::	Martens
Name Suffix::	
City of Residence::	Rotterdam

State or Province of Residence::  
Country of Residence:: NL  
Street of mailing address:: Schiekade 121 h  
City of mailing address:: Rotterdam  
State or Province of mailing address::  
Country of mailing address:: NL  
Postal or Zip Code of mailing address:: NL-3033 BK

### **Sixth Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: DE  
Status:: Full capacity  
Given Name:: Fabian  
Middle Name::  
Family Name:: Model  
Name Suffix::  
City of Residence:: Berlin  
State or Province of Residence::  
Country of Residence:: DE  
Street of mailing address:: Debenzerstr. 73  
City of mailing address:: Berlin  
State or Province of mailing address::  
Country of mailing address:: DE  
Postal or Zip Code of mailing address:: 12683

## **Seventh Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	DE
Status::	Full capacity
Given Name::	Inko
Middle Name::	
Family Name::	Nimmrich
Name Suffix::	
City of Residence::	Berlin
State or Province of Residence::	
Country of Residence::	DE
Street of mailing address::	Heinz-Kapelle-Str. 9
City of mailing address::	Berlin
State or Province of mailing address::	
Country of mailing address::	DE
Postal or Zip Code of mailing address::	10407

## **Eighth Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	DE
Status::	Full capacity
Given Name::	Manfred
Middle Name::	
Family Name::	Schmitt
Name Suffix::	
City of Residence::	Munich
State or Province of Residence::	

Country of Residence::	DE
Street of mailing address::	Hohenaschauer Str. 10
City of mailing address::	Munich
State or Province of mailing address::	
Country of mailing address::	DE
Postal or Zip Code of mailing address::	81669

### **Ninth Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	DE
Status::	Full capacity
Given Name::	Ralf
Middle Name::	
Family Name::	Lesche
Name Suffix::	
City of Residence::	Berlin
State or Province of Residence::	
Country of Residence::	DE
Street of mailing address::	Platanenstrasse 89A
City of mailing address::	Berlin
State or Province of mailing address::	
Country of mailing address::	DE
Postal or Zip Code of mailing address::	13156



### **Tenth Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	DE
Status::	Full capacity
Given Name::	Dimo
Middle Name::	
Family Name::	Dietrich
Name Suffix::	
City of Residence::	Berlin
State or Province of Residence::	
Country of Residence::	DE
Street of mailing address::	Katharinenstr. 27
City of mailing address::	Berlin
State or Province of mailing address::	
Country of mailing address::	DE
Postal or Zip Code of mailing address::	10711

### **Eleventh Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	DE
Status::	Full capacity
Given Name::	Volkmar
Middle Name::	
Family Name::	Mueller
Name Suffix::	
City of Residence::	Hamburg

State or Province of Residence::  
Country of Residence:: DE  
Street of mailing address:: Dept. Genecology, University Medical  
Center, Hamburg-Eppendorf, Martinistrasse  
52  
City of mailing address:: Hamburg  
State or Province of mailing address::  
Country of mailing address:: DE  
Postal or Zip Code of mailing address:: 20246

### **Twelfth Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: DE  
Status:: Full capacity  
Given Name:: Antje  
Middle Name::  
Family Name:: Kluth  
Name Suffix::  
City of Residence:: Berlin  
State or Province of Residence::  
Country of Residence:: DE  
Street of mailing address:: Hufelandstr. 37  
City of mailing address:: Berlin  
State or Province of mailing address::  
Country of mailing address:: DE  
Postal or Zip Code of mailing address:: 10407

### **Thirteenth Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	DE
Status::	Full capacity
Given Name::	Ina
Middle Name::	
Family Name::	Schwope
Name Suffix::	
City of Residence::	Berlin
State or Province of Residence::	
Country of Residence::	DE
Street of mailing address::	Islaendische Str. 16
City of mailing address::	Berlin
State or Province of mailing address::	
Country of mailing address::	DE
Postal or Zip Code of mailing address::	10439

### **Fourteenth Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	DE
Status::	Full capacity
Given Name::	Oliver
Middle Name::	
Family Name::	Hartmann
Name Suffix::	
City of Residence::	Berlin
State or Province of Residence::	

Country of Residence::	DE
Street of mailing address::	Sredzkistrasse 38
City of mailing address::	Berlin
State or Province of mailing address::	
Country of mailing address::	DE
Postal or Zip Code of mailing address::	10435

### **Fifteenth Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	HU
Status::	Full capacity
Given Name::	Peter
Middle Name::	
Family Name::	Adorjan
Name Suffix::	
City of Residence::	Berlin
State or Province of Residence::	
Country of Residence::	DE
Street of mailing address::	Dunckerstr. 4
City of mailing address::	Berlin
State or Province of mailing address::	
Country of mailing address::	DE
Postal or Zip Code of mailing address::	10437

### **Sixteenth Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	DE
Status::	Full capacity
Given Name::	Almuth
Middle Name::	
Family Name::	Marx
Name Suffix::	
City of Residence::	Nuernberg
State or Province of Residence::	
Country of Residence::	DE
Street of mailing address::	Viatissstrasse 88
City of mailing address::	Nuernberg
State or Province of mailing address::	
Country of mailing address::	DE
Postal or Zip Code of mailing address::	90480

### **Seventeenth Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	AT
Status::	Full capacity
Given Name::	Heinz
Middle Name::	
Family Name::	Hoefer
Name Suffix::	
City of Residence::	Munich
State or Province of Residence::	

Country of Residence:: DE  
 Street of mailing address:: Ismaningerstrasse 64  
 City of mailing address:: Munich  
 State or Province of mailing address::  
 Country of mailing address:: DE  
 Postal or Zip Code of mailing address:: 81675

### Correspondence Information

Correspondence Customer Number:: **22504**  
 Name::  
 Street of mailing address::  
 City of mailing address::  
 State or Province of mailing address::  
 Country of mailing address::  
 Postal or Zip Code of mailing address::  
 Phone number::  
 Fax Number:  
 E-Mail address::

### Representative Information

Representative Customer Number::		<b>22504</b>
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### Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National stage of	PCT/EP04/014170	12/13/03

### Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
EP	3090432	12/11/03	Yes
EP	4090041	02/10/04	Yes
EP	4090127	04/01/04	Yes
EP	4013328	06/05/04	Yes
EP	4090380	09/30/04	Yes
EP	4027213	11/16/04	Yes

### Assignee Information

Assignee name::	
Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	